ACT 44 DISCLOSURE FORM FOR ENTITIES PROVIDING PROFESSIONAL SERVICES TO THE ABINGTON TOWNSHIP PENSION SYSTEM

CHAPTER 7-A OF ACT 44 OF 2009 MANDATES the annual disclosure of certain information by every entity (hereinafter "Contractor") which is a party to a professional services contract with one of the pension funds of Abington Township (hereinafter the "Requesting Municipality"). Act 44 disclosure requirements apply to *Contractors* who provide professional pension services and receive payment of any kind from the Requesting Municipality's pension fund. The Requesting Municipality has determined that your company falls under the requirements of Act 44 and must complete this disclosure form. You are expected to submit this completed form, to the Requesting Municipality below, by October 24th, 2025. If, for any reason you believe that Act 44 does not require you to complete this disclosure form, please provide a written explanation of your reason(s) by October 17th, 2025.

RETURN COMPLETED

DISCLOSURE TO: Abington Township

Attn: Ms. Jeannette M. Hermann, Finance Director

1176 Old York Road

Abington, PA 19001

267-536-1054

jhermann@abingtonpa.gov

REQUIRED UPDATES:

Where noted, information in this form must be updated in writing as changes occur.

DEFINITIONS FOR DISCLOSURE

	DEFINITION:				
CONTRACTOR	Any person, company, or other entity that receives payments, fees, or any other form of compensation from a municipal pension fund in exchange for rendering professional services for the benefit of the municipal pension fund.				
SUBCONTRACTOR OR ADVISOR	Anyone who is paid a fee or receives compensation from a municipal pension system – directly or indirectly from or through a contractor.				
AFFILIATED ENTITY	 Any of the following: A subsidiary or holding company of a lobbying firm or other business entity owned in whole or in part by a lobbying firm. An organization recognized by the Internal Revenue Service as a tax-exempt organization under section 501(c) of the Internal Revenue Code of 1986 (Public Law 99-514, 26 U.S.C. § 501 (c)) established by a lobbyist or lobbying firm or an affiliated entity. 				
CONTRIBUTIONS	As defined in section 1621 of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code				
POLITICAL COMMITTEE	As defined in section 1621of the act of June 3 rd , 1937 (P.L. 1333, No. 320), known as the Pennsylvania Election Code				
EXECUTIVE LEVEL EMPLOYEE	 Any employee or person or the person's affiliated entity who: Can affect or influence the outcome of the person's or affiliated entity's actions, policies, or decisions relating to pensions and the conduct of business with a municipality or a municipal pension system; or Is directly involved in the implementation or development policies relating to pensions, investments, contracts or procurement or the conduct of business with a municipality or municipal pension system. 				
MUNICIPAL PENSION SYSTEM	Any qualifying pension plan, under Pennsylvania state law, for any municipality within the Commonwealth of Pennsylvania; includes the Pennsylvania Municipal Retirement System. Example: the Police Pension Plan for the Borough of Winchesterville				
MUNICIPAL PENSION SYSTEM OFFICIALS AND EMPLOYEES; MUNICIPAL OFFICIALS AND EMPLOYEES	Specifically, those listed in TABLE 2 titled: "List of Pension System and Municipal Officials and Employees" on the next page. Where applicable, includes any employee of the Requesting Municipality.				
PROFESSIONAL SERVICES CONTRACT	A contract to which the municipal pension system is a party that is: (1) for the purchase of professional services including investment services, legal services, real estate services, and other consulting services; and, (2) not subject to a requirement that the lowest bid be accepted.				

List of Municipal Officials for the Requesting Municipality

Certain requests for information in this form will refer to a "List of Municipal Officials."

To assist you in preparing your answers, you should consider the following names to be a complete list of pension system and municipal officials and employees. Throughout this Disclosure Form, the below names will be referred to as the "List of Municipal Officials."

ABINGTON TOWNSHIP

Commissioners

Thomas Hecker - President
Matthew Vahey - Vice President
Bill Bole - Commissioner
Thomas Bowman - Commissioner
Kenneth Brodsky - Commissioner
Jeffrey Browne - Commissioner
Jimmy DiPlacido - Commissioner
Lori Henry - Commissioner
Ayanna Laney-Martin - Commissioner
Drew Rothman - Commissioner
Lori A. Schreiber - Commissioner
John Spiegelman - Commissioner
Stuart Winegrad - Commissioner
Christine Young-Gertz - Commissioner
Dennis C. Zappone - Commissioner

Administration

Christopher S. Christman - Manager
Jeannette M. Hermann - Finance Director
Patrick Molloy - Chief of Police
Michael Clarke - Solicitor
Karen Sanchez - Treasurer
Tara Wehmeyer - Assistant Manager
Ashley McIlvaine - Assistant Manager

Pension Committee

John Spiegelman Matthew Vahey Stuart Winegrad Andre Berry Christian S. Posey William Weir

IDENTIFICATION OF CONTRACTORS & RELATED PERSONNEL

CONTRACTORS: (See "Definitions" – page 2) Any entity who currently provides service(s) by means of a Professional Services Contract to the Municipal Pension System of the **Requesting Municipality**, please complete all of the following:

Identify the Municipal Pension System(s) for which you are providing information:							
Ind	icate all that apply with an "X":	Х	Non- Uniform Plan	Х	Police Plan		
			Fire Plan				
this	 -	is not	sufficient. Please refer		separate sheet of paper and attach it to ach question / item you are responding		
1.	pension plan(s) identified above. Contractor, identifying them as such	titles of <u>all individuals</u> providing professional services to the Requesting Municipality 's bove. Also include the names and titles of <u>any advisors and subcontractors</u> of the as such. After each name provide a description of the responsibilities of that person with rvices being provided to each designated pension plan.					
Ja	net Wener, Relationship Manager						
fo to	or the Township's two retirement p	rogran ts fron	ns. Directed trustee servent the Township, process	ices in	oal Trust Company ("the Contractor") clude, but are not necessarily limited bursements as directed by the Township,		
2.	Please list the name and title of ar after each name, include a brief de Not applicable.	• ••	-		e-level Employee(s) that require disclosure; ons)		
3.	Are any of the individuals named in Requesting Municipality? • IF "YES", provide the name and employment. No.				• •		
\rightarrow		individ			ormer registered Federal or State lobbyist? state or federal lobbyist, and the date of		

NOTICE: All information provided for items 1- 4 above must be updated <u>as changes occur.</u> 4

- 5. Since December 17th 2009, has the *Contractor* or an *Affiliated Entity* paid compensation to or employed any third party intermediary, agent, or lobbyist that is to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality** in connection with any transaction or investment involving the *Contractor* and the Municipal Pension System of the **Requesting Municipality**?
 - <u>This question does not apply</u> to an officer or employee of the *Contractor* who is acting within the scope of the firm's standard professional duties on behalf of the firm, including the actual provision of legal, accounting, engineering, real estate, or other professional advice, services, or assistance pursuant to the professional services contact with municipality's pension system.
- → IF "YES", identify: (1) whom (the third party intermediary, agent, or lobbyist) was paid the compensation or employed by the *Contractor* or *Affiliated Entity*, (2) their specific duties to directly or indirectly communicate with an official or employee of the *Municipal Pension System* of the **Requesting Municipality** (OR), any municipal official or employee of the **Requesting Municipality**, (3) the official they communicated with, and (4) the dates of this service.

No.

- **6. Since December 17**th **2009**, has the *Contractor*, or any agent, officer, director or employee of the *Contractor* solicited a contribution to any municipal officer or candidate for municipal office in the **Requesting Municipality**, or to the political party or political action committee of that official or candidate?
- **IF "YES"**, identify the agent, officer, director or employee who made the solicitation and the municipal officials, candidates, political party or political committee who were solicited (to whom the solicitation was made).

To the best of the Contractor's knowledge, neither Ms. Werner nor any directors or executive officer of the Contractor has solicited a contribution to any municipal officer or candidate for municipal office for the Township, nor to the political party or political action committee of such official or candidate since December 17, 2009.

- 7. Since December 17th, 2009: Has the *Contractor* or an *Affiliated Entity* made any contributions to a municipal official or any candidate for municipal office in the **Requesting Municipality?**
- → IF "YES", provide the name and address of the person(s) making the contribution, the contributor's relationship to the Contractor, The name and office or position of the person receiving the contribution, the date of the contribution, and the amount of the contribution.

To the best of the Contractor's knowledge, neither the Contractor nor an Affiliated Entity has made a contribution to any municipal officer of candidate for municipal office for the Township since December 17, 2009.

- **8.** Does the *Contractor* or an *Affiliated Entity* have any direct financial, commercial or business relationship with any official identified on the *List of Municipal Officials*, of the **Requesting Municipality?**
- **NOTE: A written letter is required from the **Requesting Municipality** acknowledging the relationship and consenting to its existence. The letter must be attached to this disclosure. Contact the **Requesting Municipality** to obtain this letter and attach it to this disclosure before submission.

Contractor is an affiliate of Principal Financial Group ("PFG"), a diversified financial services company with officers throughout the United States. It is possible that PFG provides individual financial products or services to one or more of the Township's commissioners, administrative staff, or members of the Township's pension committee. However, Contractor does not provide services directly to any of the listed individuals.

- **9.** Has the *Contractor* or an *Affiliated Entity* given any gifts having more than a nominal value to any official, employee or fiduciary specifically, those on the *List of Municipal Officials* of the **Requesting Municipality?**
- **IF "YES"**, Provide the name of the person conferring the gift, the person receiving the gift, the office or position of the person receiving the gift, specify what the gift was, and the date conferred.

To the best of the Contractor's knowledge, neither the Contractor nor an Affiliated Entity has given any gifts having more than nominal value to any official (including those on the List of Municipal Officials), employee or fiduciary of the Township.

- **10.** Disclosure of contributions to any political entity in the Commonwealth of Pennsylvania **Applicability:** A "yes" response is required and full disclosure is required **ONLY WHEN ALL** of the following applies:
 - a) The contribution was made within the last 5 years
 - b) The contribution was made by an officer, director, executive-level employee or owner of at least 5% of the *Contractor* or *Affiliated Entity*.
 - c) The amount of the contribution was at least \$500 and in the form of:
 - 1. A single contribution by a person in (b.) above, **OR**
 - 2. The aggregate of all contributions all persons in (b.) above;
 - **d)** The contribution was for
 - 1. Any candidate for any public office or any person who holds an office in the Commonwealth of Pennsylvania;
 - **2.** The political committee of a candidate for public office or any person that holds an office in the Commonwealth of Pennsylvania.
- **IF "YES"**, provide the name and address of the person(s) making the contribution, the contributor's relationship to the *Contractor*, The name and office or position of the person receiving the contribution (or the political entity / party receiving the contribution), the date of the contribution, and the amount of the contribution.

To the best of the Contractor's knowledge, no officer, director, executive-level employee or owner of Contractor or an Affiliated Entity has made a contribution, as defined in this question, to any political entity in the Commonwealth of Pennsylvania.

11. With respect to your provision of professional services to the Municipal Pension System of the **Requesting** Municipality:

Are you aware of any apparent, potential or actual conflicts of interest with respect to any officer, director or employee of the *Contractor* and officials or employees of the **Requesting Municipality?**

NOTE: If, in the future, you become aware of any apparent, potential, or actual conflict of interest, you are expected to update this **Disclosure Form** immediately in writing by:

- Providing a brief synopsis of the conflict of interest (and);
- An explanation of the steps taken to address this apparent, potential, or actual conflict of interest.
- **IF "YES"**, Provide a detailed explanation of the circumstances which provide you with a basis to conclude that an apparent, potential, or actual conflict of interest may exist.

No

	equested above, please provide that information below or on a separate piece of
Not applicable.	
• • • • • • • • • • • • • • • • • • • •	of the person(s) participating in the completion of this Disclosure. One of the Item #1 above must participate in completing this Disclosure and must sign the
below verification attesting to the participa	
Name: Janet Werner	Name:
Position: Relationship Manager	Position:
Name:	Name:
Position:	Position:
Name:	Name:
Position:	Position:
SIGNATURE	
TITLE	<u> </u>
DATE	_

VERIFICATION

I, <u>Janet Werner</u>	, hereby state that I am	Relationship Manager	for
(Name)		(Position)	
Principal Final (Contractor)	ncial Group and I am authorize	ed to make this verification.	
to Abington Township Pension	et forth in the foregoing Act 44 Disclor n System are true and correct to the kaking material misstatements or omis Section 705-A(e) of Act 44.	oest of my knowledge, informati	on and belief. I also
I understand that false statem falsification to authorities.	ents herein are made subject to the p	penalties of 18 P.A.C.S. § 4904 re	elating to unsworn
		Janet Werner (Sep 30, 2025 09:1	5:33 EDT) Signature
		09/30/202	<u> </u>
			Date